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Certified Copies	_ Certificate	es of Status
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04/18/06--01037--004 \*\*70.00

**FILED** 2006 JUN 20 P 3: 32 SECRETARY OF STATE TALLAHASSEE, FLORIDA





#### Central Licensing Bureau, Inc.

1501 NORTH UNIVERSITY SUITE 550 LITTLE ROCK, ARKANSAS 72207-5271 www.centrallicensingbureau.com (501) 664-8044 FAX - (501) 664-8182 GENA BRADSHAW, FLMI Chiel Executive Officer

W.H.L. WOODYARD IV Chief Operating/Financial Officer

April 6, 2006

Florida Dept. of State Division of Corporations 2661 Executive Center Cr. W Tallahassee, FL 32301

Dear Sir/Madam:

Enclosed, please find the necessary documents to qualify Eastern Insurance Group, Inc. to do business in your state.

I trust this letter and the enclosed documents place them in compliance with your state Statutes. However, if any further action is required, please do not hesitate to contact me.

Thank you for your consideration of this filing.

Sincerely,

Lauri Stone Corporate Qualification Division

/ls

Enclosures



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

April 19, 2006

#### CENTRAL LICENSING BUREAU, INC. 1501 N. UNIVERSITY, SUITE 550 LITTLE ROCK, AK 72207-5271



SUBJECT: EASTERN INSURANCE GROUP, INC. Ref. Number: W06000018472

We have received your document for EASTERN INSURANCE GROUP, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

#### Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6995.

Wanda Cunningham Document Specialist New Filing Section

Letter Number: 206A00026625

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#### **COVER LETTER**

**TO:** Registration Section Division of Corporations

SUBJECT: Eastern Insurance Group, Inc.

(Name of corporation - must include suffix)

Dear Sir or Madam:

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The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Lauri Stone

(Name of Person)

Central Licensing Bureau

(Firm/Company)

1501 N. University, #550

(Address)

Little Rock, AR 72207

(City/State and Zip code)

For further information concerning this matter, please call:

Lauri Stone

(Name of Person)

501 ) 664-8044 (Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:** 

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

#### MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Enclosed is a check for the following amount:

Strain \$70.00 Filing Fee

S78.75 Filing Fee & Certificate of Status

at (

S78.75 Filing Fee & Certified Copy \$87.50 Filing Fee, Certificate of Status & Certified Copy

#### PPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA**

#### IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Eastern Insurance	e Group, Inc.							
	rporation; must include "INCORPORATEI rp," "Inc," "Co," or "Corp.")	D," "C(	OMPAI	NY," "CORP	ORATION,	3		
E16 10	ISURANCE Agency Inc ble in Florida, enter alternate corporate nam							
(If name unavailal	ole in Florida, enter alternate corporate nam	ne adopt	ed for t	the purpose of	f transacting	business ir	ı Florida	1)
2. Pennsylvania		3. <u>23-22</u>	225720		· ·····			_
(State or country u	nder the law of which it is incorporated)			(FEI num	ber, if applic	able)		
4. 12/10/1982		5. Perpe	••••••					<del></del>
(Date o	of incorporation)	(Dui	ration:	Year corp. w	ill cease to e	xist or "pe	rpetual"	)
6. Upon Qualification								
	(Date first transacted business (SEE SECTIONS 607.1501 & 607.		•	. U		)		
7. 613 Baltimore Dr.	, Wilkes Barre, PA 18702					1		_
	(Principal office ad	idress)				SEC	2005	
613 Baltimore Dr.,	Wilkes Barre, PA 18702					<u> </u>	5	
	(Current mailing ac	ddress)				ASS ASS	120	
8. The business of in	nsurance, functioning as an insurance agenc	у.				ודי <del>ון -</del> סביד ר	σ	_C
(Purpose(s)	surance, functioning as an insurance agenc of corporation authorized in home state or address of Florida registered agent: (P	country	to be c	carried out in s	state of Flori		بب	
9. Name and street	address of Florida registered agent: (P	.O. Boy	( <u>NO</u> ]	<u>[acceptable]</u>	)	ID A	32	
Name:	C T Corporation System							
Office Address:	1200 South Pine Island Road							
	Plantation		, Flori	ida <u>33324</u>				
	(City)			(Zip co	de)			

10. Registered agent's acceptance:

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Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

C T Corporation System

See Attached (Registered agent's signature) By:

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

A. DIRECTORS						
Chairman:			<u>.</u>			
Address:			·,	ELC:	100	91.38
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Vice Chairman:						1
Address:				- F L )	یں یے	
				אטוא		
Director:						
Address:						
Director:				· ·		
Address:				. <del></del>		
B. OFFICERS	noncor					
President: Tag J. Siegen	pencer					
Address: 613 Baltimore Dr.						
	18702					
Wilkes Barre, PA	18702					
<u>Wilkes Barre, PA</u> Vice President: <u>Kevin P. Au</u>	18702 htin and George Kavulich	and Paul J.				
<u>Wilkes Barre, PA</u> Vice President: <u>Kevin P. Au</u>	18702 htin and George Kavulich	and Paul J.	Siegel			
<u>Wilkes Barre, PA</u> Vice President: <u>Kevin P. Au</u> Address: <u>613 Baltimore Dr.</u> <u>Wilkes Barre, PA</u> Secretary: <u>Michael Banks</u>	18702 htin and George Kavulich 18702	and Paul J.	Siegel			
<u>Wilkes Barre, PA</u> Vice President: <u>Kevin P. Au</u> Address: <u>613 Baltimore Dr.</u> <u>Wilkes Barre, PA</u> Secretary: <u>Michael Banks</u>	18702 htin and George Kavulich 18702	and Paul J.	Siegel			
<u>Wilkes Barre, PA</u> Vice President: <u>Kevin P. Au</u> Address: <u>613 Baltimore Dr.</u> <u>Wilkes Barre, PA</u> Secretary: <u>Michael Banks</u> Address: <u>72, 10, Fra</u>	18702 nin and George Kavulich 18702 nklin St., Wil	and Paul J. kes-Barre,	Siegel PA 18702			
<u>Wilkes Barre, PA</u> Vice President: <u>Kevin P. Au</u> Address: <u>613 Baltimore Dr.</u> <u>Wilkes Barre, PA</u> Secretary: <u>Michael Banks</u> Address: <u>72, 10, Fra</u>	18702 nin and George Kavulich 18702 nklin St., Wil	and Paul J. kes-Barre,	Siegel PA 18702			
Wilkes Barre, PA Vice President: <u>Kevin P. Au</u> Address: <u>613 Baltimore Dr.</u> <u>Wilkes Barre, PA</u> Secretary: <u>Michael Banks</u> Address: <u>72 Nor. Fra</u> Treasurer: <u>Michael Banks</u>	18702 min and George Kavulich 18702 nklin St., Wil Franklin St.,	and Paul J. kes-Barre, Wilkes-Barr	Siegel PA 18702 e, PA 1870:	2		
Wilkes Barre, PA Vice President: <u>Kevin P. Au</u> Address: <u>613 Baltimore Dr.</u> <u>Wilkes Barre, PA</u> Secretary: <u>Michael Banks</u> Address: <u>72 Nor.th</u> Address: <u>72 Nor.th</u>	18702 tin and George Kavulich 18702 nklin St., Wil Franklin St., may attach an addendum	and Paul J. kes-Barre, Wilkes-Barr	Siegel PA 18702 e, PA 1870:	2		
Wilkes Barre, PA Vice President: <u>Kevin P. Au</u> Address: <u>613 Baltimore Dr.</u> <u>Wilkes Barre, PA</u> Secretary: <u>Michael Banks</u> Address: <u>72 N. Fra</u> Treasurer: <u>Michael Banks</u> Address: <u>72 Nor.th</u> NOTE: If necessary, you 13.	18702 tin and George Kavulich 18702 nklin St., Wil Franklin St., may attach an addendum	and Paul J. kes-Barre, Wilkes-Barr h to the application	Siegel PA 18702 e, PA 18703 listing additional o	2 fficers and/or d		

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## ACCEPTANCE OF APPOINTMENT

#### RE: Eastern Insurance Group, Inc.

Pursuant to Sections 48.091 and 607.0501, Florida Statutes, the undersigned acknowledges and accepts its appointment as registered agent of the above corporation and agrees to act in the capacity and to comply with the provisions of the Florida Business Corporation Act (1990) relative to keeping open the registered office at the address specified above. The undersigned is familiar with, and accepts the obligations of, Section 607.0505, Florida Statutes.

Dated: February 3, 2006

C T CORPORATION SYSTEM

By\_ Miles, onathan L Assistant Secretary

JUN 20 P ω ω

#### COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

MARCH 16, 2006

# TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

**I DO HEREBY CERTIFY THAT,** 

### EASTERN INSURANCE GROUP, INC.

is duly incorporated under the laws of the Commonwealth of Pennsylvania and remains a subsisting corporation so far as the records of this office show, as of the date herein.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

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Secretary of the Commonwealth

Certification Number; 5873051-1 Verify this certificate online at http://www.corporations.state.pa.us/corp/soskb/verify.asp